

December 1991

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Clinical Center News

Biomechanics Lab Marks 6th Anniversary

By Diane Naughton

The Six Million Dollar Man and the Bionic Woman would have felt very much at home here in the Clinical Center's biomechanics lab. Numerous pieces of high-tech equipment—cameras, computers, and monitors—are set up throughout the lab to conduct state-of-the-art studies of human motion. The biomechanics lab, part of the Department of Rehabilitation Medicine, is located on the sixth floor of the Clinical Center.

The biomechanics lab celebrates its sixth anniversary this fall. With its sophisticated facilities and capabilities, it is "recognized as one of the premier research/clinical



From left to right, Steven Stanhope, Tom Kepple, and Karen Siegel work in the biomechanics lab. Photo by J. Crawford

evaluation facilities in the U.S.," says Dr. Steven Stanhope, chief of the biomechanics lab. Working with Stanhope are Computer Programmer Specialist Tom

Kepple, who arrived in 1986, and Senior Staff Specialist Karen Siegel, who has been with the lab since 1988.

Kepple's work is the cornerstone of the

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4-West Celebrates New Unit

By Sue Kendall

The mood was festive on a brilliant, crisp Halloween afternoon as the 4-West patient care unit held an open house to celebrate its recently completed renovation. The first in a series of unit renovations, 4-West represents a true team effort

among clinical staff, administration, and engineering services. Says Deputy Executive Officer for Operations Larry Eldridge, "This was the prototype project. It was a learning experience, and everyone is very pleased with the results." Three more units await similar renovations, to begin soon, he says.

4-West is "home" to patients in studies of depression and manic-depressive illness. "We are studying the effects of light and dark on hormonal changes in the brain," says Dr. Thomas Wehr, National Institute of Mental Health physician. "The old unit looked pretty grim. Sometimes

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R&W... At Work for You in '92

The R&W membership drive is underway! Now through January 31, you can purchase a yearly membership for only \$4—a savings of \$1—and receive a free gift. In addition, you will become eligible to win great prizes, including a “Year of Fun with R&W,” which includes a year’s worth of tickets, outings, and entertainment.

Your R&W membership entitles you to shop in any of the R&W gift shops, rent videos, use the dry-cleaning service, join one of the many clubs, participate in the trips, purchase discount tickets, stamps...the list goes on and on!

Sheila Bouvet and Theresa Shea HHS Employees of the Month—October

Sheila Bouvet has provided guidance to the secretarial staff in the five clinical services within Clinical Pathology. She has formed a secretarial committee which identifies opportunities for improvement and gives guidance on a needed basis. She is never too busy to respond to requests for help. If she does not have the answer, she knows the workings of NIH and finds someone who can direct her. The senior staff have complete confidence in her advice. Sheila has a great capacity for work. She is very productive and always keeps up with a very heavy workload. In addition, she is an excellent listener who also gives her time willingly and enthusiastically to organize activities for charitable causes and staff recognition. She is so often the starting spark for morale boosting.

Current R&W memberships (the blue cards) will expire December 31, 1991.

You can join the R&W today at any R&W gift shop, or by sending a check for \$4 (made payable to R&W of NIH) to: R&W of NIH, 9000 Rockville Pike, Bldg. 31 Room B1W30, Bethesda, Md. 20892. (Sorry, the free gift cannot be sent through the mail, but your card and membership guide will be mailed back to you.) For more information, call the R&W activities desk at 496-4600. ■

Theresa Shea has made many contributions to the Diagnostic Radiology Department (DRD). She has consistently exceeded performance expectations, both in terms of productivity and overall quality of work. Had it not been for her supportive assistance, it would have been virtually impossible for the DRD to handle the various functions in the procurement and supply of clinical and research material to support its mission. Her office has been a model for other procurement operations. Theresa’s efforts and contributions have been of substantial value to the DRD and she should be commended and recognized accordingly. ■

Holiday Season is Good Time to GIVE Blood

By Keith Redmond
Donor Resources Supervisor

The holiday season is a special time of year. The spirit of giving is in the air and in your blood. This holiday season, please don’t forget the NIH Blood Donor Center. It takes just a few minutes to give something of yourself to someone who is in need—that is the essence of giving.

During the holiday season, many employees are not around, but the patients are. Therefore, it is extremely important for us to maintain a strong blood supply for the Clinical Center’s patients.

The Donor Center’s friendly and helpful staff will be more than happy to answer your questions or schedule an appointment for you to come in and donate blood. Please call Keith, Kathleen, Pam, Marguerite, or Jackie at the blood bank on 496-1048. ■

CC News

Editor: Karen D. Riedel

Clinical Center News is published monthly by the Office of Clinical Center Communications, Colleen Henrichsen, Chief, for employees of the Clinical Center, National Institutes of Health, Department of Health and Human Services.

News, article ideas, calendar events, letters, and photographs are encouraged and can be submitted to Bldg. 10 room 1C255 or by calling 496-2563.

Deadline for submission is the second Monday of each month.

A Message From the Acting Director

The recent Senate hearings on the confirmation of Judge Thomas caused many of us to think afresh about the issue of sexual harassment.

Sexual harassment has no place anywhere in our society. It is especially offensive in a hospital, which by its very nature is dedicated to providing care and support.

Sexual harassment in the workplace is illegal. As Acting Director of the Clinical Center, I am totally committed to the goal of providing a work environment free from any form of sexual harassment. We cannot and we will not tolerate violation of this policy. Any employee who is the victim of sexual harassment is urged to contact his or her manager or the Clinical Center Equal Employment Opportunity (EEO) officer; no retaliation will result. In this matter, as in so many others, prevention is preferable to cure.

Given the wide cultural differences among us all, we can still agree on the basic notion that each of us is responsible for our own behavior. And we should be aware that, benign intentions aside, inappropriate behavior can have a malignant impact. I suspect all of us can recognize blatant examples: the unwelcome sexual advances, the requests for sexual favors, the gross insults, the taunting. But what of behavior "at the boundary"? How do we handle polarization among our colleagues when a "harmless flirtation" by one is considered a "gross insult" by another? Title

VII of the Civil Rights Act of 1964 makes it clear that sexual harassment includes conduct whose impact—irrespective of its intent—is intimidating, hostile, or leads to an offensive working environment. It is the responsibility of each of us to modify our actions and to avoid such offensive behavior.

I have asked Ray Becich, Clinical Center executive officer, Ogden Lacy, Clinical Center EEO manager, and Rona Buchbinder, Clinical Center educational services officer, to work with me in designing strategies to enhance our sensitivity. In the short run, we will organize intradepartmental discussion groups, using as a focal point the excellent video distributed by the Clinical Center EEO. But in the long run—and we are joined in this for the long run—we will need to begin by polling our employees to learn your feelings, your expectations, and your needs. We need to foster a climate of awareness that promotes a culture of gender equity. We should instinctively be treating all our colleagues with dignity and sensitivity.

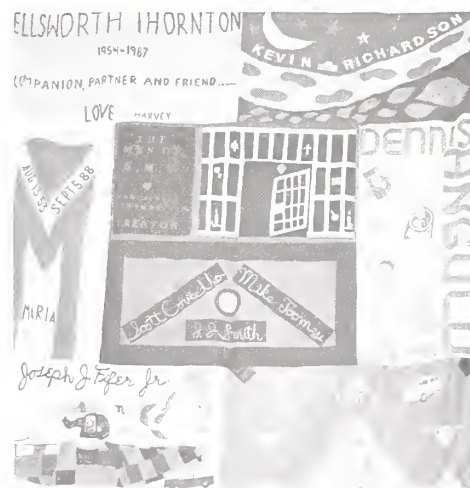
*Dr. Saul Rosen,
Acting CC Director*

CC Displays NAMES Project AIDS Memorial Quilt

In honor of World AIDS Day, Dec. 2, the Clinical Center is displaying sections of the NAMES Project AIDS Memorial Quilt in the lobby through the end of December.

The NAMES Project quilt is made of thousands of 3'x6' cloth panels, each commemorating the life of someone who has died from complications associated with human immunodeficiency virus (HIV), which causes AIDS.

The quilt display was hung in November and has three 12'x12' sections, each with eight separate 3'x6' panels commemorating an individual life. The entire quilt, comprises more than 14,000 panels. It was last displayed in 1987 on the Capitol Mall in Washington, D.C., and covered a space larger than two football fields. The NAMES Project hopes to display the quilt in its entirety again on Columbus Day 1992. ■

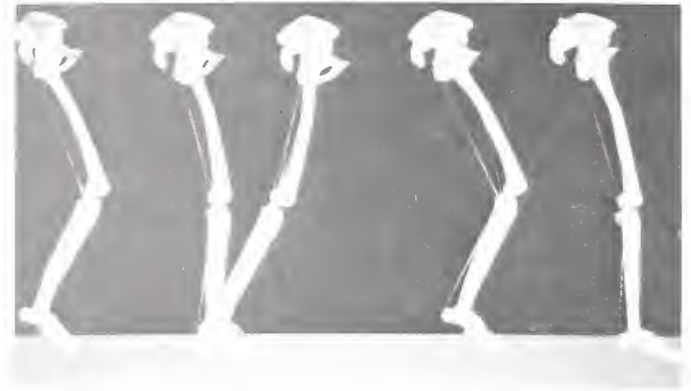


CC displays NAMES Project AIDS memorial quilt.

Photo by E. Branson



Data is collected using reflective targets on a person walking.



Computer-generated image of the musculoskeletal system of a person walking.

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biomechanical analysis software and technology that the biomechanics lab is currently developing and using.

"Tom is in the 'blue sky' division of the biomechanics lab," claims Stanhope. "He is working on projects we hope to do in the future."

Siegel, a physical therapist, is involved in the clinical application of Kepple's and Stanhope's technical work. According to Stanhope, Siegel was chosen because she "could interface clinically—doing patient evaluations and at the same time integrating the technical components."

The biomechanics lab works with institute researchers to evaluate patients with a variety of disorders, including Parkinson's disease, rheumatoid arthritis, stuttering, and osteogenesis imperfecta. One specific area of interest for the biomechanics lab is the measurement of gait, or walking. To the casual observer, two people may have similar gaits, but they may truly be using very different muscles and other mechanisms to move around. Technology in the biomechanics lab allows scientists to see these differences, and even measure them.

In patients with rheumatoid arthritis, for example, researchers can look closely at how their walking may be affected by the chronic disease, and suggest specific therapies. The patient is hooked up to reflective targets [see Figure 1], which are seen by a series of cameras connected to a computer. Using software developed by biomechanics lab staff, the computer generates a picture [see Figure 2]. The biomechanics lab can then calculate specific measurements, such as the force placed on certain parts of the foot. These evaluations might take place before or after surgery, giving doctors a more objective way to determine the degree of disability and the success of any interventions.

Scientists and researchers worldwide—most recently from Great Britain, Russia, Brazil, and China—have come to the Clinical Center's biomechanics lab to observe its state-of-the-art facilities.

"These visits allow us to demonstrate what we've accomplished over the last six years," says Stanhope. In several cases, the biomechanics lab has been asked to assist in developing similar labs in other countries and is

currently doing so with scientists from Brazil.

Stanhope, along with Horace Cascio and Paul Smith of the Biomechanics Engineering and Instrumentation Program, have applied for a patent on camera technology developed in the biomechanics lab. In addition, Stanhope has negotiated a Cooperative Research and Development Agreement (CRADA) with a private-sector scientist to further enhance the capabilities of the biomechanics lab. CRADAs enable government scientists to collaborate with private-sector individuals and companies on specific research projects, with the goal of bringing scientific discoveries to the marketplace quickly for the benefit of public health. This will be the Clinical Center's first formal CRADA since the implementation of the Federal Technology Transfer Act in 1986. Several other Clinical Center collaborative agreements are in the works. Stanhope hopes to make the technology he and his staff are developing "an integral part of patient evaluation and the treatment planning process." ■

On the QT

November marked the first anniversary of Quality Together (QT) at the Clinical Center. Meetings with department heads and facilitators evidenced substantial efforts and accomplishments and a continued commitment to move on. For most, training provided a celebratory kickoff to our new way of doing business.

"The initial training was very well received," says Peggy Spina, facilitator for the Clinical Pathology Department. "It had a positive impact. Our technologists have been eager to be involved and pleased to see all the good ideas that are surfacing. It wasn't long before we began to hear people using QT words and ideas, and see people aligning themselves with QT."

Says John Tuscan, facilitator for the Nursing Department, "Because nursing is a very large department, QT training was a large undertaking for us. I think we underestimated how big the job of training would be. But it created a sense of excitement, new-found hope, and increased morale at all levels. There is still some apprehension—a fear that this is just another program the government buys into every few years—but overall there are positive attitudes."

Getting past the training is indeed a milestone. But, says Bourn, "After the training, we hit the realization that now it's time for the real work. It didn't take long to realize it wouldn't be easy. It isn't until you start to apply QT theories that you realize how

difficult it is to change to the new process. If you haven't felt a little stress, you probably haven't truly gotten into it."

"One point of difficulty," according to Spina, is "How do you go out there and find out what your customers want? Which way do you go? It's difficult to find the time to meet and work on QT. I think we have done well so far, trying to stay organized and on a timetable." She adds, "I appreciate the help and guidance from the QT coordinators to help us keep focused and stay on track."

"Prior to QT, we were one-dimensional," Bourn reflects. "We always asked our patients questions, but we didn't chart the results. And it is new to us to think of employees as customers. Now, I think about the customers' needs in almost everything we do—Does this work contribute toward success from our customers' point of view? Can we do this better? How well did we do before?"

Says Elaine Ayres, facilitator for the Nutrition Department, "I think there is a positive outcome since we started QT. We have a lot of data and know exactly where we need to go. We are at that jumping off point and it looks like we have our work cut out for us—for the next five years!"

Tuscan has already noticed changes as a result of QT.

"We've changed some of the ways we do business with other departments, and things between departments are already moving smoother."

According to Spina, because of QT, "people are now focused on

what a unique place the Clinical Center is and what they can do. There is a new appreciation for our jobs."

Says Bourn, "It feels like I have a new sheet—a new focus entirely. I think it's going to take a long time, but I think there are a lot of people vested in this."

The QT steering committee is very concerned about providing appropriate support for department heads and facilitators, particularly during the upcoming year, the first focused on improvement projects. Maureen Stoppenbach, assistant hospital administrator and QT coordinator, is meeting with department heads and facilitators to share organizational progress and determine the needs of the individual departments. Additionally, a team headed by Dottie Cirelli, assistant hospital administrator, has developed a strategy to provide facilitators with additional facilitation-team training, scheduled to begin in January 1992. ■

Looking for Japanese Donors

The hematology service is looking for Japanese persons willing to donate 10 milliliters of blood for a platelet study. Interested individuals can have their blood drawn on Mondays and Wednesdays between 8 and 8:30 a.m. Donors will receive \$10. To make an appointment call 496-6891. ■

Christopher Eve Celebrates 80th Birthday

By Sue Kendall

Turning 80 is quite a milestone for anybody; but being productively employed full-time at age 80 is a singular achievement. Christopher Eve, Clinical Pathology physicist, lays claim to both accomplishments, and his co-workers and wife helped him celebrate with a surprise party on Nov. 8. Lured into the conference room by Dr. Thomas Fleisher, chief of immunology service, Eve was speechless as shouts of "Surprise!" rang out from the 50 or so well-wishers. Says Eve, "I was completely surprised and delighted." Fleisher started the festivities by telling Eve, "We're proud and happy to have you on our staff, and we hope you'll be with us for many more years." Eve

has been with the Clinical Pathology Department since 1960 and with the civil service for over 50 years.

"I still enjoy what I do here at Clinical Pathology. I have a few more projects I'd like to do," he says. Then, who knows? Maybe the world of academics, if Clinical Pathology will part with him.

Described by co-workers as imaginative, brilliant, and inquisitive, Eve is Clinical Pathology's resident Mister Fix-It. From laboratory equipment to earrings, Eve has the knack to make right what's gone wrong. Reflecting this, his cake was decorated with wrenches, hammers, and screwdrivers.

His laboratory is studied pandemonium. Says Sheila Bouvet, co-worker, "This looks

like a mad scientist's lab, but Chris has a place for everything, and everything is in its place." Says Peggy Spina, assistant to the chief, "Chris has this ability to visualize a problem and dream up a gizmo to solve it." A favorite invention among lab staff is Eve's "Stopper Popper," a device that sucks the stoppers out of vials, eliminating the need for technicians to pry them off with their fingers.

"This reduces the chance of blood spills and cuts," says Spina. During a recent survey by the College of American Pathologists, inspectors were delighted with the Stopper Popper and wanted to know if it had a patent. (It does.) Eve has also applied for a patent on a dry-ice maker, which enables the lab to generate its own in a crunch.

Eve studied chemistry and physics before settling on mathematics as his major at George Washington University.

"I wanted to learn everything; I thought if I could understand physical chemistry, I could figure out the rest." Years later, Eve laments, he still doesn't know everything.

When he's not fixing or inventing, Eve and his wife of almost 44 years, Clare, travel the world. Mrs. Eve told of trips to Bali, Costa Rica, Guatemala, Kenya, Holland, and Belgium, among many others. They'd still like to go to China, Japan, and the Soviet Union, she said. Eve's co-workers gave him a lighted globe and a camera to help him keep track of where he's been. Says Eve, "I was looking at that globe, and I saw a couple of places I haven't been yet." ■



Christopher Eve, 80, celebrates his love of the world.

Photo by E. Branson

Pharmacy Technicians Recognized



CC Pharmacy Department celebrates Pharmacy Technician Day.

Photo by J. Crawford

The Clinical Center Pharmacy Department observed the first National Pharmacy Technician Recognition Day on October 22.

Pharmacy supervisors provided refreshments and special buttons to recognize the pharmacy

technicians for over 40 years of dedicated service.

"Our pharmacy technicians are of vital importance to the department," says Pharmacy Department Chief Joseph Gallelli. ■



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patients had second thoughts about coming here, so we paid a great deal of attention to lighting and colors during the design phase," he says.

The efforts paid off. Walking through the door to the unit, a visitor is embraced by muted grey walls and mauve carpeting. Soft classical guitar music filters from the stereo in the elegant yet homey sitting room. Sunlight floods through the windows where dark safety screens had once dimmed the light.

An especially attractive feature of the unit is the "4-West Permanent Collection" of 38 original and reproduction works of art displayed on the walls. Says Suzanne Dolan, staff nurse, "We

feel that original art gives a sense of dignity to patients that reproductions don't convey." All the pieces depict aspects of human emotions and interaction, she pointed out. Dolan worked closely with Crystal Parmele of the art and signage program to select art that would meet these purposes. Dolan, an artist as well, modestly points to one of her own paintings on display.

To the casual observer, the unit's aesthetics upstage the extensive renovations to the infrastructure. Says Executive Officer Ray Becich, "This unit now meets all the life-safety code requirements, especially the sprinkler system and handicap accessibility." Sturdy oak handrails

and resilient wall coverings were also installed. Becich points out that the JCAHO team was quite impressed with the unit during their recent survey of the Clinical Center.

The open house was well attended. Cider and a sumptuous spread of homemade treats enticed attendees to linger and socialize in the attractive surroundings. Stopping every few moments to greet a co-worker or embrace a former patient who had come for the party, Gerri Spillers, head nurse, comments, "This is a great thrill. I can't say enough good things about everyone who was involved." ■

Holiday Bazaar and Bake Sale to be Held Dec.10

Holiday shopping is coming to the Clinical Center. The first holiday bazaar and bake sale, jointly sponsored by the R&W and the Friends of the Clinical Center (FOCC), will be held in the Clinical Center Visitor Information Center on Dec. 10 from 11 a.m. until 4 p.m.

More than 25 crafters and merchants will display their wares for your holiday gift shopping. There will be a wide variety of

items, such as jewelry, framed paintings and artwork, handmade pottery, clothing, children's books, specialized candy items, Christmas crafts, handcrafted fresh and dried Christmas wreathes, doll houses and accessories, leather goods, and much more.

The bake sale, held in conjunction with the bazaar, will feature the popular gingerbread men, cupcakes, brownies, cookies, cakes, pies, famous apple cake,

and other baked goods. If you are interested in donating goods for the bake sale, call Andrea Rander at 496-1807.

All proceeds from the holiday bazaar and bake sale will benefit the FOCC in its continuing effort to provide emergency financial assistance to NIH patients and their families. Come by and "shop till you drop." ■

Happy Holidays!

December Calendar of Events

4 **Grand Rounds**
12 noon-1 p.m. Masur Auditorium
Viral Gastroenteritis, Albert Kapikian, M.D., NIAID
Premenstrual Syndrome: New Views, David Rubinow, M.D., NIMH

18 **Grand Rounds**
12 noon-1 p.m. Masur Auditorium
Myoclonus, Mark Hallett, M.D., NINDS, *The Use of Radioligands for Physiologic Studies, Diagnosis, and Drug Development*, William Eckelman, Ph.D., CC

11 **Grand Rounds**
12 noon-1 p.m. Masur Auditorium
Human Cytochrome P450: Roles in Drug Therapy and Metabolic Activation of Chemical Carcinogens, Frank Gonzalez, Ph.D., NCI, *The Ethics of Clinical Trials*, Eugene Passamani, M.D., NHLBI

25 No CC Grand Rounds Today
Christmas Holiday